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**** CONTINUING DATA *******

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and claims benefit of 60/065,186 11/12/1997

(*)Data provided by applicant is not consistent with PTO records.

**** FOREIGN APPLICATIONS *********** IF REQUIRED, FOREIGN FILING LICENSE GRANTED ****

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Foreign Priority claimed	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	<input type="checkbox"/> Met after Allowance	STATE OR COUNTRY	SHEETS DRAWINGS	TOTAL CLAIMS	INDEPENDENT CLAIMS
35 USC 119(a-d) conditions met	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No		CA	124	6	1

ADDRESS

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TITLE

Anti-PRO335 antibodies

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